Effective October 1, 2003

1												
	TOTAL CLAIMS		(0	Column 1)	(Column 2)	TY	SMALL ENTITY TYPE				IER THAN	
	FOR	FOR		MBER FILED			RATE	FEE]	RAT		
I	TOTAL CHARGEABLE CLAIMS			··	NUMBER EXTRA	BA	SIC FEE	385.00	OR	BASIC F		-
	INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PF			minus 20=	*	_ ×	(\$ 9=		OR	: X\$18		-
				minus 3 =		_ ×	43=		1			-
ľ						1 -		OF		X86=		_
'	* If the differ	ence in column	1 is less th	an zero, enter "	'0" in column 2		45=		OR	+290=		
		CLAIMS A	S AMEN	DED - PART	ti .	· TO	TAL _		OR	TOTAL		•
		(Column CLAIMS	1) .	(Column 2) (Column 3)			SMALL ENTITY OR SMALL EN					
Ę	Total Independe	REMAININ AFTER	1G	HIGHES NUMBE PREVIOU	R PRESENT		A	DDI-	UH <u>.</u>	SMALL	ADDI-	-
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MEN	Independe		Minus	***	=	X\$	9=		DR .	X\$18=	TEE_	-
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	11	+145	5= ·			290=		1				
-	7/5/07		•		*	OT TIDDA	TAL		<u>_</u>	TOTAL		ı
o/	(Column 1)			(Column :			CC Service		' ADI	OIT. FEE	·	ı
NEWPORT		REMAINING AFTER		NUMBER PREVIOUS	PRESENT		AD		Ė		ADDI-	l
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	Independent	* /	Minus Minus	** BS	= 45	X\$ 9=		OF	$\int_{\mathbf{x}^{\prime}}$	\$18=	FEE	•
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				LI LINDENT CLA	IM L		+	OF	\^	86=	·	
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_		(Column 1)	. •	(Cal		TOTA ADDIT. FE	E	OR	ADDI	TOTAL T. FEE	•	
		CLAIMS REMAINING	T	(Column 2) HIGHEST	(Column 3)	<u></u>	·					
L		AFTER AMENDMENT		NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADDI				ADDI-	
1	Total	*	Minus	PAID FOR	EXTRA	TANE	TIONA FEE	iL.	RA		IONAL FEE	
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		•			OR	700						
t	re entry in colur	nn 1 is less than the nber Previously Pa	e entry in colu ld For וא דשׁוּיִּ	mn 2, write "0" in co	olumn 3.	+145=	,	OR	+290)=		
·u	IN MICHAGO Nice		41 616	J UTAUE BIACCING	30 00 anias 466 a	ADDIT. FEE		OR	TO DDIT. I	TAL		
	0-675 (Rev. 10/		- Total O	mineheugeut) is the	an 3, enter "20," an 3, enter "3." e highest number fo	und in the app	propriate b	ox in colu	mn 1.			
•	W (MBY 10)	USI										